To:
Health Check
Agenices
HMOs and Other
Managed Care
Programs

Immunization CPT Code Changes

This Update provides information about new or changed Current Procedural Terminology (CPT) codes for immunizations.

Immunization Code Changes

Wisconsin Medicaid has adopted the 1999 changes in *Current Procedural Terminology* (CPT) codes for immunizations. For all claims submitted on and after April 1, 1999, for services provided on and after January 1, 1999, Wisconsin Medicaid requires that providers use the procedure codes from Appendix 1, "HealthCheck Laboratory, Other Test, and Immunization Codes."

Attached is a replacement appendix for your Part D, Division I, HealthCheck provider handbook.

Only the changes shown below have been made:

- Influenza virus vaccine 90724 has been changed to 90657-90660.
- Hemophilus influenza B vaccine 90737 has been changed to 90645-90648.
- Hepatitis A vaccine, 90730, has been changed to 90632-90634 and 90636.
- Pneumococcal vaccine can be billed under either 90732 or 90669 as appropriate.
- Rotavirus vaccine 90680 has been added.

This Update is for fee-for-service providers. Managed care providers must contact their managed care organization (MCO) to determine their MCO's policy for immunization codes. Coverage is the same for Medicaid recipients in both fee-for-service and managed care programs.

POH 1649

The Wisconsin Medicaid Update is the first source for provider information including Medicaid policy and billing information.

Wisconsin Medicaid is administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For provider questions, call the Medicaid fiscal agent at (800) 947-9627 or (608) 221-9883 or visit our web site at: www.dhfs.state.wi.us/medicaid.

Appendix 1

HealthCheck Laboratory, Other Test, and Immunization Codes HealthCheck Agencies (Provider Type 66) can only bill the lab, test, and administration codes listed in the following tables:

Immunizations

Code	Description	POS	TOS
90632	Hepatitis A vaccine, adult dosage for intramuscular use	0, 3, 4	1
90633	Hepatitis A vaccine, pediatric/adolescent dosage-2 dose schedule, for intramuscular use	0, 3, 4	1
90634	Hepatitis A vaccine, pediatric/adolescent dosage-3 dose schedule, for intramuscular use	0, 3, 4	1
90636	Hepatitis A and hepatits B vaccine (HepA-HepB) adult dosage, for intramuscular use	0, 3, 4	1
90645*	Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule), for intramuscular use	0, 3, 4	1
90646*	Hemophilus influenza b vaccine (Hib), PRP-D conjugate, for booster use only, intramuscular use	0, 3, 4	1
90647*	Hemophilus influenza b vaccine (Hib), PRP-OMP conjugate (3 dose schedule), for intramuscular use	0, 3, 4	1
90648*	Hemophilus influenza b vaccine (Hib), PRP-T conjugate (4 dose schedule), for intramuscular use	0, 3, 4	1
90657	Influenza virus vaccine, split virus, 6-35 months dosage, for intramuscular or jet injection use	0, 3, 4	1
90658	Influenza virus vaccine, split virus, 3 years and above dosage, for intramuscular or jet injection use	0, 3, 4	1
90660	Influenza virus vaccine, live, for intranasal use	0, 3, 4	1
90669	Pneumococcal conjugate vaccine, polyvalent, for intramuscular use	0, 3, 4	1
90680	Rotavirus vaccine, tetravalent, live, for oral use	0, 3, 4	1
90700*	Diptheria, tetanus toxoid, and acellular pertussis vaccine (DtaP), for intramuscular use	0, 3, 4	1
907011	DTP (diptheria, tetanus toxoids, and pertussis vaccine)	0, 3, 4	1
90702*	DT (diptheria and tetanus toxoids)	0, 3, 4	1
90707*	MMR (measles, mumps, and rubella)	0, 3, 4	1

Code listings continued on next page

Immunizations, continued

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Code	Description	POS	TOS			
90712*	Poliovirus vaccine, live, oral (any type) (OPV)	0, 3, 4	1			
90713*	Polio vaccine, injectible	0, 3, 4	1			
90718*	Td (tetanus & diptheria toxoids absorbed for adult use)	0, 3, 4	1			
90720*	DTP and Hib (Tetramune)	0, 3, 4	1			
90732*	Pneumococcal polysaccharide vaccine, 23-valent, adult dosage, for subcutaneous or intramuscular use	0, 3, 4	1			
90744*	Hepatitis B; newborn-11 years of age	0, 3, 4	1			
90746*	Hepatitis B; 20+ years of age	0, 3, 4	1			
90749	Unlisted immunization procedure	0, 3, 4	1			
W7018* ²	DTP, MMR, and Polio	0, 3, 4	1			

Laboratory Tests

Code	Description	POS	TOS
81002³	Urinalysis, by dipstick, without microscopy, nonautomated	0, 3, 4	5
85013 ³ 85018 ³	Blood count; Spun hematocrit OR Blood count; Hemoglobin	0, 3, 4	5
82465 ⁴	Cholesterol, serum, total	0, 3, 4	5
82947 ⁴	Glucose, quantative	0, 3, 4	5
99000	Lab handling fee	0, 3, 4	5

Other Tests

Code	Description	POS	TOS
86550	Skin test; tuberculosis; intradermal	0, 3, 4	5

^{*}Vaccine is provided through the VFC. Refer to Section II-L of this handbook for information on the VFC.

¹May not be billed with procedure code 90702 or 90718.

²May not be billed with procedure codes 90701, 90707, or 90712.

³May be performed by HealthCheck agencies with an approved Clinical Laboratory Improvement Act (CLIA) waiver.

⁴May only be performed for high risk children and require appropriate follow-up.